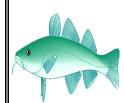
11/30/1999 OMB Control No. 0648-0393 Expiration Date: 04/30/2000



APPLICATION FOR AMERICAN FISHERIES ACT (AFA) INSHORE CO-OP PERMIT

Due December 15, 1999

United States Department of Commerce National Oceanic and Atmospheric Administration National Marine Fisheries Service Alaska Region P.O. Box 21668 Juneau, Alaska 99802-1668



BLOCK A - CO-OP CONTACT INFORMATION					
1. Co-op Name		2. Name of Co-op Representative			
3. Co-op Business Mailing Address: P.O. Box or Street, city, state, zip code					
4. Business Telephone Number	5. Business FAX Number	6. Business E-mail Address			

BLOCK B - CO-OP DESIGNATED PROCESSOR INFORMATION

- 1. If a shoreside processor, name and physical location of AFA Inshore Processor to whom the Co-op will deliver at least 90% of its BSAI pollock.
- 2. If a stationary floating processor, name and single geographic location in latitude and longitude at which the AFA Inshore Processor will process BSAI pollock under the AFA.
- 3. Federal Processor Permit Number of the AFA Inshore Processor.

BLOCK C - REQUIRED ELEMENTS OF CO-OP CONTRACT

BEGONG REQUIRED ELEMENTO OF GO OF CONTRACT
Is a copy attached of the co-op contract showing the signatures of all parties and vessel owners? Yes [] No [] NOTE: This application is not valid and cannot be processed without the submission of a copy of the co-op contract.
Is a copy attached of a letter requesting a business review letter on the fishery cooperative from the Department of Justice and any response to such request? Yes [] No [] NOTE: This application is not valid and cannot be processed without the submission of a copy of this information.
Was the co-op contract signed by the owners of at least 80% of the qualified catcher vessels that delivered BSAI pollock for processing to the processor in Block B in the directed BSAI pollock fishery, in the year prior to that in which this co-op would be effective? Yes [] No [] If NO, this co-op cannot be authorized.
Did each catcher vessel listed IN Block D, during the year prior to the year in which the co-op will be in effect, deliver more pollock to the processor listed in B(1) above than to any other AFA inshore processor? Yes [] No [] If NO, this co-op cannot be authorized.

Has the owner of each catcher vessel listed in Block D, agreed to fish under terms authorized under an AFA catcher vessel permit with an inshore endorsement, and whose vessel has no permit sanctions or other type of sanctions against it that would prevent it from fishing for groundfish in the BSAI.

Yes [] No [] If NO, this co-op cannot be authorized.

BLOCK D - VESSEL INFORMATION

All co-op member vessels must be listed. List complete information for each co-op catcher vessel member (attach additional pages if necessary).

1. Vessel Name	2. ADF&G Vessel Registration Number	USCG Documentation Number	4. AFA Permit Number (If known)
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BLOCK E- CERTIFICATION OF NOTARY AND APPLICANT				
Under penalty of perjury, I declare that I have examined this application, and to the best of my knowledge and belief, the information presented hereon is true, correct and complete.				
1. Signature of co-op representative:	2. Date:			
3. Printed Name of co-op representative:				
4. Notary Public (Signature): ATTEST	6. Affix Notary Stamp or Seal Here:			
5. Commission Expires:				

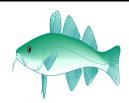
Please mail completed application to NMFS Alaska Region, Restricted Access Management, P.O. Box 21668, Juneau, AK 99802-1668. If you need additional information, contact RAM at 1-800-304-4846 or 907-586-7202.

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing the instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sustainable Fisheries, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802.

ADDITIONAL INFORMATION

Before completing this form please note the following: 1) The NMFS may not conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) This information is being used to implement the American Fisheries Act; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort; 4) Submission of this information is required of persons seeking to participate in the groundfish fisheries under authority of AFA.



INSTRUCTIONS Application for American Fisheries Act Inshore Co-op Permit

NOTE: This Inshore Co-op Permit Application and any amendments that add or delete co-op member vessels must be received by National Marine Fisheries Service (NMFS), Restricted Access Management (RAM) no later than December 15, for Co-ops to be effective in the following calendar year.

Type or print legibly in ink; retain a copy of completed application for your records. Completed forms should be mailed to: **NMFS Alaska Region, RAM, P.O. Box 21668, Juneau, AK 99802-1668**. If you need information, contact RAM at 1-800-304-4846 or 907-586-7202. **Please allow at least 10 working days for your application to be processed.** Items will be sent by first class mail, unless you provide alternate instructions *and* include a prepaid mailer with appropriate postage or a corporate account number for express delivery.

BLOCK A - CO-OP CONTACT INFORMATION

- 1. Co-op Name.
- 2. Name of co-op Representative.
- 3. Co-op business mailing address (P.O. Box or Street, city, state, zip code).
- 4. Business telephone number, including area code.
- 5. Business FAX number, if available.
- 6. Business E-mail address, if any.

BLOCK B - CO-OP DESIGNATED PROCESSOR INFORMATION

- 1. If a shoreside processor, name and physical location of AFA inshore processor to whom the co-op will deliver at least 90% of its BSAI pollock.
- 2. If a stationary floating processor, name and the single geographic location in latitude and longitude at which the processor will process BSAI pollock under the AFA.
- 3. Federal processor permit number of the inshore processor.

BLOCK C - REQUIRED ELEMENTS OF CO-OP CONTRACT

Indicate **YES** or **NO** whether a copy is attached of the co-op contract showing the signatures of all parties and vessel owners? **NOTE:** This application is not valid and cannot be processed without the submission of a copy of the co-op contract.

Indicate **YES** or **NO** whether a copy is attached of a letter requesting a business review letter on the fishery cooperative from the Department of Justice and any response to such request? **NOTE: This application is not valid and cannot be processed without the submission of a copy of this information.**

Indicate **YES** or **NO** if the co-op contract was signed by at least 80% of the qualified catcher vessels that delivered BSAI pollock for processing to the processor in Block B in the directed BSAI pollock fishery in the year prior to that in which this co-op would be effective. **If NO, this co-op cannot be authorized.**

Indicate **YES** or **NO** whether or not each catcher vessel listed in Block D, during the year prior to the year in which the co-op will be in effect, deliver more pollock to the processor listed in B(1) than to any other AFA inshore processor.

Indicate **YES** or **NO** whether or not each catcher vessel listed in Block D, is otherwise eligible to fish for groundfish in the BSAI, has an AFA catcher vessel permit with an inshore endorsement, and has no permit sanctions or other type of sanctions against it that would prevent it from fishing for groundfish in the BSAI.

BLOCK D - VESSEL INFORMATION

All co-op member vessels must be listed. List complete information for each co-op member catcher vessel (attach additional pages if necessary).

- 1. Vessel Name Enter complete vessel name as displayed in official documentation.
- 2. ADF&G Vessel Registration Number Enter 5-digit ADF&G number (example: 51233).
- 3. U.S. Coast Guard Documentation Number Enter USCG documentation number (example: 566722).
- 4. AFA Permit Number Enter the AFA Permit Number.

BLOCK E - CERTIFICATION OF NOTARY AND APPLICANT

Sign, Print and date the application in the presence of Notary Public. As a result of this requirement, we will not process applications faxed to us. Representatives acting on behalf of an applicant must submit proof of authorization to submit this application on their behalf.

- 1. Signature of the co-op representative
- 2 Date this application was signed.
- 3. Printed name of the co-op representative
- 4-6. Notary Certification. A Notary Public must Attest and affix Notary Stamp. Notary Public verification cannot be completed by the person submitting this application.

PUBLIC REPORTING BURDEN STATEMENT

Public reporting burden for this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Sustainable Fisheries, Alaska Region, NMFS, P.O. Box 21668, Juneau, AK 99802.

ADDITIONAL INFORMATION

Before completing this form please note the following: 1) The NMFS may not conduct or sponsor this information request, and you are not required to respond to this information request, unless the form displays a currently valid OMB control number; 2) This information is being used to implement the American Fisheries Act; 3) Federal law and regulations require and authorize NMFS to manage commercial fishing effort; 4) Submission of this information is required of all persons seeking to participate in the groundfish fisheries under authority of AFA.